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## IowaCare Now Closer to Home in Sioux City, Waterloo Areas

**DES MOINES, Iowa** – Low-income adults living in northwest or northeast central Iowa will receive IowaCare health benefits much closer to home beginning Oct. 1.

Instead of traveling to University Hospitals and Clinics in Iowa City, IowaCare patients will now be able to receive routine care and disease management at designated clinics in Sioux City and Waterloo.

"This is a tremendous improvement in a program that has already grown three times faster than we predicted when we launched it five years ago," said Iowa Medicaid Enterprise Director Jennifer Vermeer.

About 38,000 adults, almost all of them single or childless couples, receive services through IowaCare, which is managed by the Iowa Medicaid Enterprise. Members must have household incomes below 200 percent of federal poverty guidelines.

"We know how difficult it is to travel long distances to obtain health care. Until now, we didn't have resources to expand our provider network," Vermeer said.

IowaCare was created in 2005 by using resources allocated to either UIHC or Broadlawns Hospital in Des Moines. As a result, services were limited to those two venues, with Broadlawns reserved for residents of Polk County.

Additional resources approved by the Legislature and Gov. Culver last spring will enable IowaCare services to gradually expand to Iowa's 13 federally qualified health clinics.

Vermeer said the first two are the Siouxland Community Health Center in Sioux City and Peoples Community Health Clinic in Waterloo.

IowaCare patients in 12 northwest Iowa counties will use the Sioux City clinic, including those in Lyon, Osceola, Sioux, O'Brien, Plymouth, Cherokee, Woodbury, Ida, Monona, Crawford, Harrison, and Shelby.

IowaCare patients in 14 counties will use the Waterloo clinic, including those in Worth, Mitchell, Howard, Winneshiek, Cerro Gordo, Floyd, Chickasaw, Fayette, Franklin, Butler, Bremer, Grundy, Black Hawk, and Buchanan.

Hospital and specialized services will continue to be provided at UIHC or, for Polk residents, at Broadlawns.

Vermeer said the added convenience will likely cause enrollment to jump sharply, which in turn will stretch resources. It is for that reason that future expansion plans are tentative. Regional clinics based in Ottumwa and Fort Dodge are tentatively set to be added to the network in January.

Another advancement for IowaCare patients, she said, is the adoption of the "medical home" model of care at all four IowaCare venues, including the two clinics and two hospitals. As a result, more than 60 percent of IowaCare members will be covered by this model.

The medical home model concentrates care in a primary setting, increases use of health information technology to improve coordination of care, establishes disease management –

especially for those with diabetes – and establishes peer to peer consultation between the clinic and the hospital, thus avoiding unnecessary trips to Iowa City.